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normahenderson@adelphia.net**FACSIMILE TRANSMITTAL SHEET****FROM: Norma E. Henderson****DATE: October 2, 2006****NUMBER OF PAGES TRANSMITTED**
(INCLUDING COVER SHEET)**17**If you did not receive the indicated number of pages or if any pages are illegible, please
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TO: Mail Stop Amendment (Examiner Ashokkumar B. Patel, Art Unit 2154)**FIRM: U.S. Patent and Trademark Office****RE: Response to Office Action – Pat. App. Ser. No. 09/921,167****PHONE****NUMBER: 571-272-3972****FAX****NUMBER: 571-273-8300****NOTES/COMMENTS:**

Response to Office Action, mailed 3/30/2006, for Patent Application Ser. No. 09/921,067 (Docket No. 056450/0119019).

The following items are being sent herewith:

Transmittal form (1 page)

Extension of Time Request (1 page)

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Amendment and Response to Office Action (13 pages)

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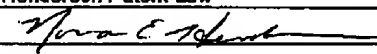
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/921,167
		Filing Date	Aug 2, 2001
		First Named Inventor	Bennett, Simon
		Art Unit	2154
		Examiner Name	Patel, Ashokkumar B.
Total Number of Pages in This Submission	16	Attorney Docket Number	058450/0119019

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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